

April 14, 2003
Montana Medicaid Notice
School Based Services Providers

Billing For Services Provided Before May 15, 2003

It is essential for schools to bill for Medicaid covered services provided before May 15, 2003 before that date in order to receive the full Medicaid payment. On May 15, 2003, Montana Medicaid will begin paying schools only the federal portion of the fees currently paid to schools for Medicaid covered medical services. The federal portion represents approximately 72% of the current payments. This is due to the school-refinancing project in which the Department of Public Health & Human Services and the Office of Public Instruction have been working together to establish a certification of match process. Assuming schools participate in billing for new services (school psychologists and personal care paraprofessionals) in addition to the current Medicaid covered services, this should not, on a statewide basis, significantly impact school revenues.

Changes Effective January 1, 2003

School-based providers are no longer required to obtain a physician order for physical, occupational and speech therapy services. This order was required to be updated every 180 days. The current IEP now serves in place of the physician order. Unless otherwise indicated, PASSPORT approval is still required for services provided to Medicaid eligible children within the school. Depending on the primary care provider, PASSPORT approval may be effective for up to one year.

Schools may bill for services provided by school psychologists as well as personal care paraprofessionals, as long as these services are indicated in the child's Individualized Education Plan (IEP). School psychologist services do not require PASSPORT approval. Codes that are billable for these providers are as follows: 90801, 90802, 90804, 90806, 90808, 90846, 90847 and 90853. Please refer to your CPT-4 coding book for descriptions. School psychologists are required to record each service they provide (see page 7 of the *School Based Services* manual, *Medical Record Documentation*).

PASSPORT Provider Approval Required for Paraprofessional Services

Personal care paraprofessional services require PASSPORT approval. The procedure code to utilize for billing these services is T1019 (personal care service, each 15 minutes). Attached is a child profile document that will assist you in determining what activity of daily living tasks are billable to Medicaid as well as how to establish the time required for each task for the child. This document will serve as the physician's order and/or PASSPORT approval when signed by the child's primary care provider. The primary care provider signature must be on the child profile. Once the signature is obtained, all dates of service back to the start of the current IEP or January 1, 2003, whichever is most current, will be billable to Medicaid. This profile document is considered the plan of care and should be included in the child's medical record. It is not

necessary to include or append the profile in the child's IEP. However, personal care services must be specified in the IEP as a service the child requires, just as you currently do for other related medical services.

Remember, personal care services are for assistance in activities of daily living and not for assistance in educational tasks or for purposes of behavior management. Bus escort services may only be billed when a child is functionally limited and receives a medical service at the school on that date of service.

Therapy Service Limits

Physical, Occupational and Speech therapy services have been reduced from 70 hours per state fiscal year (July - June) each, down to 40 hours per state fiscal year for each provider type. For children, however, services over 40 hours may be billed to and reimbursed by Medicaid as long as it is documented the child is still progressing in treatment. Maintenance services are not billable to Medicaid.

Contact Information

If you have any questions, please contact Provider Relations 8:00 a.m. - 5:00 p.m. Monday - Friday (Mountain time):

(800) 624-3958 In state
(406) 442-1837 Out of state

PERSONAL CARE PARAPROFESSIONAL
SERVICES PROVIDED IN SCHOOLS
CHILD PROFILE

PURPOSE: To provide an instrument for collecting and documenting essential information needed to establish the Medicaid child's functional limitations and ability to perform activities of daily living.

To document information on service planning issues for personal care services.

To provide a worksheet for determining the daily units per week needed by the child.

PROCEDURE: The Profile must be completed by the Individualized Education Plan (IEP) team at the initial meeting for services, at the annual review, and whenever a significant change in the child's condition occurs causing the service need to change.

INSTRUCTIONS:

Child Name--Enter the child's full name.

Child ID -- Enter child's Medicaid ID number.

DOB: Child's date of birth.

Date Span --The time period the child will receive personal care services, up to one year.

Level of Impairment--Rate the child's impairment level according to the following scale for each task listed:

- 0 = Independent: No functional impairment. The child is able to conduct the activities without difficulty and has no need for assistance. Need is met with adaptive equipment or service animal.
- 1 = Standby/Cuing: Mild functional impairment. The child is able to conduct the activity but does require standby assist or cuing.
- 2 = Limited Assist: Moderate functional impairment. The child is able to conduct the activity with moderate difficulty and requires minimal assistance.

- 3 = Extensive Assist: Severe functional impairment. The child has considerable difficulty completing the activity and requires extensive assistance.
- 4 = Total Dependence: Total functional impairment. The child is completely unable to carry out any part of the activity.

An IEP team member must decide which of the five impairment levels best describes the child reviewed. An impairment in this context is a functional limitation, i.e., a limitation in the ability to carry out an activity or function. A person has an impairment with respect to a particular activity if s/he is limited, either physically or mentally, in his/her ability to carry out that activity. "0" and "4" are absolutes in the sense that they indicate no functional impairment or total dependency. For example, if a child can perform any of the dressing tasks for themselves, a "4" is not appropriate. If s/he can perform the dressing task without difficulty, a "0" is appropriate. If a child is able to conduct an activity only with difficulty, and the difficulty is such that the child frequently cannot complete some part of the activity, then the child is impaired, even if the child at other times can complete the entire activity. In addition, if the degree of difficulty is such that the child should have at least minimal assistance with that activity, then the child is impaired, even if the child can (with difficulty) conduct the activity without assistance. If the child can complete the activity but needs cuing to do so, or, because of safety considerations needs someone there while completing the task, they would require standby assist. If the difficulty with an activity does not affect the child's conduct of the activity or does not cause any problems for the child, the child is not impaired.

Enter a level for each task.

The Personal Care Paraprofessional Services Profile is designed to rate a child's capacity for self-care. Determine the level for each task according to the capacity for self-care and not according to the child's access to a resource to assist with the task. In rating each item, use the child's response, your own observations of activity, and any knowledge provided about the child from other sources. To determine the severity of the child's impairment, consider the following factors:

1. Child Perception of the Impairment--Does the child view the impairment as a major or minor problem?

2. Congruence--Is the child's response to a particular question consistent with the child's response to other questions and, also, consistent with what you have observed?
3. Child History--Probe for an understanding of the child's history as it relates to the current situation and of the child's attitude about the severity of the impairment. How has the impairment changed the child's lifestyle?
4. Adaptation--If the child has adapted his physical environment or clothing to the extent that he is able to function without assistance, the degree of impairment will be lessened, but the child will still have an impairment. This includes the use of adaptive equipment.

Use the following examples for each item to help you differentiate between scores of "2" or "3".

	2 -Limited Assist	3 = Extensive
1. Dressing	Child needs <i>occasional</i> help with zippers, buttons, or putting on shoes and socks. Child may need help laying out and selecting clothes.	Child needs help with zippers, buttons, or shoes and socks. Child needs help getting into garments, that is, putting arms in sleeves, legs in pants, or pulling up pants. Child may dress totally inappropriately without help or would not finish dressing without physical assistance.
2. Grooming	Child may set out supplies. Child may accomplish tasks an adaptive device for assistance.	Child needs to have help with shaving <i>or</i> shampooing, etc., because of inability to see well, to reach, or to successfully use equipment. Child needs someone to put lotion on body or to comb or brush hair.
3. Toileting	Child has instances of urinary incontinence, and needs help because of this from time to time. Fecal incontinence does not occur unless child has a specific illness episode. Child may have catheter or colostomy bag, and occasionally needs assistance with management.	Child often is unable to get to the bathroom on time to urinate. Child has occasional episodes of fecal incontinence. Child may wear diapers to manage the problem and needs some assistance with them. Child usually needs assistance with catheter or colostomy bag.

	2 -Limited Assist	3 = Extensive
4. Transferring	Child usually can get out of bed or chair with minimal assistance.	Child needs hands-on assistance when rising to a standing position or moving into a wheelchair to prevent losing balance or falling. Child is able to help with the transfer by holding on, pivoting, and/or supporting himself
5. Ambulation	Child walks alone without assistance for only short distances. Child can walk with minimal difficulty using an assistive device or by holding onto walls or furniture.	Child has considerable difficulty walking even with an assistive device. Child can walk only with assistance from another person. Child never walks alone outdoors without assistance. Child may use a wheelchair periodically.
6. Eating	Child may need occasional physical help. Child eats with adaptive devices but requires help with their positioning	Child usually needs extensive hands-on assistance with eating. Child may hold eating utensils but needs continuous assistance during meals. Child would not complete meal without continual help. Spoon feeding of most foods is required, but child can eat some finger foods.
7. Exercise	Child may need occasional assistance in completing exercise routine. Child may need occasional support or guidance.	Child needs some assistance in completing exercise routine. Child needs support or guidance.
8. Bus Escort	Child requires minimal assistance on bus enroute to or from school. Child does not have family or caregiver to assist. Child receives a medical service at school on this date.	Child requires assistance on bus enroute to or from school. Child does not have family or caregiver to assist. Child receives a medical service at school on this date.

Check the appropriate column that indicates the degree to which the child's need for help in the completion of each task is met. Check one column for each task.

M = Met--The child's needs are met. The child may be independent in this task, or the need for help is being met by someone other than the personal care paraprofessional. Other sources for meeting the need include family or friends. No time can be authorized for any task coded with an "M".

P = Partially Met--The child requires help with the task. Someone other than the personal care paraprofessional is providing that help part of the time, or the child may participate in the task.

U = Unmet--The child requires help with the task and the need is currently unmet.

Activities of Daily Living Tasks (ADL)

For each task, check any applicable sub-task listed.

NOTES:

Minutes Per Day--For each task to be provided, enter the daily number of minutes needed to conduct that task.

Days Per Week--For each task to be provided, enter the number of days per week the child will require assistance with the task.

Total Minutes--Multiply the minutes per day times the days per week to obtain the total minutes per week for each task.

**PERSONAL CARE PARAPROFESSIONAL SERVICES
PROVIDED IN SCHOOL
CHILD PROFILE**

Child Name:	Child ID:	DOB:
Date Span:		

Personal Care Activities of Daily Living Tasks

I N Min/Day X Days/Week = Total min.

1. Can child dress self?	Dressing			X =
2. Does child need assistance with an exercise program?	Exercise			X =
3. Can child groom self? (i.e. wash, comb hair)	Grooming			X =
4. Does child have any difficulties getting to and using the bathroom?	Toileting			X =
5. Can child get in and out of their bed or chair?	Transferring			X =
6. Can child walk without help?	Ambulation			X =
7. Does child need assistance eating?	Eating			X =
8. Bus Escort	Escort			X =

I = Impairment
0 = Independent
1 = Cuing
2 = Limited Assistance
3 = Extensive Assistance
4 = Total Dependence

N = Need
M = Met
P = Partially Met
U = Unmet

Total

Total Authorized Units _____ . 4 = _____ Hours

Comments:

Verbal Order Date: _____ Initial: _____

School _____

School Representative Signature _____ Date _____

Primary Care Provider Signature _____ Date _____

Passport Provider Number _____

TASK/HOUR GUIDE INSTRUCTIONS

GENERAL: The amount of time you allow for any particular task should be determined by taking into account:

- the amount of assistance the child will usually need;
- which specific activities need to be accomplished;
- environmental/housing factors that may hinder (or facilitate) service delivery;
- child's unique circumstances; or

SPECIFIC TASKS: Each task has one or more activities or sub-tasks that forms the overall task. When calculating time, carefully consider which activities will be provided.

1. Dressing: G Dressing recipient G Undressing recipient G Cuing assistance

2. Exercise: G Range of motion

3. Grooming: G Brushing teeth G Laying out supplies G Combing/brushing hair G Applying nonprescription lotion to skin G Washing hands and face G Cuing assistance

4. Toileting: G Changing diapers G Changing colostomy bag/emptying catheter bag G Assisting on/off bed pan G Assisting with use of urinal G Assisting with feminine hygiene needs G Assisting with clothing during toileting G Assisting with toilet hygiene: includes use of toilet paper & washing hands G Set-up supplies and equipment (Does NOT include preparing catheter equipment) G Standby assistance

5. Transfer: G Non-ambulatory movement from one stationary position to another (transfer) G Adjusting/ changing recipient's position in bed/chair (positioning)

6. Ambulation (Walking): G Assisting child in rising from a sitting to a standing position and/or position for use of walking apparatus G Assisting with putting on and removing leg braces and prostheses for ambulation G Assisting with ambulation/using steps G Standby assistance with ambulation G Assistance with wheelchair ambulation **NOTE:** Do not include exercise as ambulation.

7. Eating: G Spoon feeding G Bottle feeding G Set up of utensils/adaptive devices G Assistance with using eating or drinking utensils/adaptive devices G Cutting up foods G Standby assistance/encouragement **NOTE:** Tube feeding is not an allowable service.

8. Bus Escort: G Accompanying child on bus when child is functionally limited, not for purposes of behavioral management, and receives medical service at the school on that date.

PERSONAL CARE PARAPROFESSIONAL SERVICES DELIVERY RECORD

Child Name		Child ID					
		Monday	Tuesday	Wednesday	Thursday	Friday	
	Date						
Grooming							
Dressing Assistance							
Exercise							
Toileting							
Transfer Assistance							
Ambulation Assistance							
Eating Assistance							
Bus Escort							
Notes:							

		Monday	Tuesday	Wednesday	Thursday	Friday	
	Date						
Grooming							
Dressing Assistance							
Exercise							
Toileting							
Transfer Assistance							
Ambulation Assistance							
Eating Assistance							
Bus Escort							
Notes:							
<p>Personal Care Assistance services must be included in the child's IEP before Medicaid can be billed. This certifies that time recorded and work tasks listed were provided and are correct. Misrepresentation constitutes fraud.</p>							
<p>_____ Personal Care Paraprofessionalr Signature and Date</p>							